

EXHIBIT 4

Excerpts from the Deposition Transcript of
Peter Hanson

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW HAMPSHIRE

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LILLIAN BERNIER, :

Plaintiff, :

vs. : Case No. 1:23-cv-00523-LM-AJ

TURBOCAM, INC., :

Defendant. :

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DEPOSITION OF PETER HANSON, INDIVIDUALLY,
AND AS CORPORATE DESIGNEE OF TURBOCAM, INC.

Manchester, New Hampshire

Thursday, March 27, 2025

9:55 AM

Job No.: 570043

Pages: 1 - 163

Recorded By: Isaac Weaver

Transcript of Peter Hanson, Individually and as Corporate Designee
Conducted on March 27, 2025

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1 question so that you understand it.

2 Could you please state your full name
3 for the record?

4 A My full name is Peter Hanson.

5 Q Okay. And what is your residential
6 address?

7 A I live at [REDACTED]
8 [REDACTED]

9 Q Are you currently employed?

10 A Yes.

11 Q Okay. And -- and who is your employer?

12 A Turbocam, Turbocam, Inc.

13 Q Okay. And what is your current
14 position with Turbocam, Inc.?

15 A My title is director of talent
16 development.

17 Q What are your duties and
18 responsibilities as director of talent development?

19 A My primary role or roles are to oversee
20 the personnel team, as well as the employee growth
21 and development team.

22 Q How long have you been the director of
23 talent development at Turbocam?

24 A I believe I was promoted into that role
25 in 2018.

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1 A Our president, Marian Noronha.

2 Q And how long have you been a direct
3 report to Marian Noronha?

4 A Since I became the director of talent
5 development, which, again, I believe was 2018, but
6 I could be wrong on that exact timing.

7 Q Okay. And what positions at Turbocam
8 report to you?

9 A On the employee Growth and development
10 side, we have an employee growth and development
11 coordinator, an employee growth and development
12 administrator, and a manager of technical training.

13 On the personnel team, there's a senior
14 benefit specialist, a benefit specialist, a senior
15 personnel administrator, three personnel
16 administrators, one personnel administrator, and
17 the part of the title is personnel administrator
18 recruitment lead. It's the title for that person.

19 Q All of those job positions report to
20 you?

21 A Correct.

22 Q Okay. And has that been the case since
23 the time you became the director of talent
24 development?

25 A Yeah. Positions have become vacant at

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1 THE WITNESS: Okay.

2 MR. KLEIN: -- objecting for the
3 (crosstalk) --

4 MS. MINICH: Yeah. Unless I tell you
5 not to, you -- you should answer.

6 THE WITNESS: Okay. It varies. I've
7 -- I have what are designed to be scheduled
8 check-ins with Marian, which are what we would
9 term catch-up, to use the term.

10 Sometimes those happen. Sometimes they
11 don't, because of Marian's travel schedule, my
12 schedule. It often gets changed or skipped for a
13 -- a month. It -- they were typically on a once a
14 month cadence.

15 MR. KLEIN: Okay.

16 THE WITNESS: Other than that, it's
17 more of just conversations that seeing Marian,
18 informal unscheduled on occasion, but no -- no,
19 like, specific cadence to those.

20 BY MR. KLEIN:

21 Q Prior to the time that you became the
22 director of talent development in 2018, were you
23 -- were -- were you employed by Turbocam before
24 that?

25 A Yes.

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1 Q Okay. And when did you first become
2 employed by Turbocam?

3 A April of 2012.

4 Q And what was your position?

5 A Personnel manager.

6 Q And what were your duties and
7 responsibilities as personnel manager?

8 A I oversaw the personnel functions for
9 Turbocam.

10 Q What was the difference in your role as
11 personnel manager as compared to the director of
12 talent development?

13 A Primary difference was, I didn't have
14 employee growth and development that department
15 under me at that time. I also reported to a
16 director of organization development, and
17 deposition no longer exists.

18 Q As personnel manager, were you
19 responsible for oversight of Turbocam's of benefit
20 plans?

21 A To a -- to a degree. At that point,
22 because I reported to the director of organization
23 development who reported to Marian Noronha, I
24 wasn't -- I was involved, but there was more
25 people in decision-making at that point. But I

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1 THE WITNESS: I don't know.

2 BY MR. KLEIN:

3 Q Okay. Are all -- are all Turbocam
4 employees eligible for the company's -- for
5 enrollment and participation in the company -- one
6 of the company's health benefit plans?

7 A No.

8 Q Okay. Which Turbocam employees are
9 eligible?

10 A Just -- did you did you say which are
11 eligible?

12 Q Yes.

13 A Those that meet the eligibility
14 requirements per plan.

15 Q What are the current eligibility
16 requirements for the Turbocam High-Deductible
17 Health Plan, which is Exhibit 3?

18 A They would -- what we would call
19 permanent employees working 25 hours or more would
20 be eligible for the medical plans.

21 Q All right. And is that the same for
22 the employee group HMO plan?

23 A Yes.

24 Q All right. So all Turbocam employees
25 who work 25 hours or more are eligible for

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1 participation in the company's health benefits; is
2 that correct?

3 A No. With the exception of temporary
4 employees.

5 Q Okay. All right. So let me then --

6 A Seasonal interns.

7 Q Got it. All permanent --

8 A Right.

9 Q All of Turbocam's permanent employees
10 working 25 hours or more are eligible for the
11 company's medical insurance benefits?

12 A Correct.

13 Q Okay. And has that been the case since
14 the inception of the plan, which is Exhibit 3 in
15 January of 2021?

16 A Yes.

17 Q Okay. If I can -- let's see. If I can
18 direct your attention to Page 1 of the plan, which
19 is Bates stamped in the upper right-hand corner,
20 Turbocam 0021.

21 MS. MINICH: Here's the number at the
22 top.

23 THE WITNESS: This?

24 MS. MINICH: Yep. So that we're going
25 to look at the number -- the Bates stamp number

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1 there. So 21.

2 THE WITNESS: Okay. 21. Sorry.

3 BY MR. KLEIN:

4 Q Okay. If you look at the paragraph
5 under, A, establishment of plan about midway
6 through it says, quote, These benefits have been
7 established by the employer and are provided on a
8 self-funded basis; do you see that sentence?

9 A Yes.

10 Q Okay. What does it mean that the
11 benefits are provided on a self-funded basis?

12 A It means the -- the benefits are
13 directly funded by the employer and -- yeah, the
14 employer has the sole responsibility and liability
15 for payment and benefits under this plan.

16 Q So does that mean that Turbocam
17 directly pays claims for healthcare services made
18 by employees under the plan?

19 A Yes, through HPI.

20 Q Okay. Can you maybe -- just -- let's
21 just back up a second. So it -- it's correct that
22 this plan is what's considered an employer
23 self-funded health benefits plan; is that correct?

24 A Yes.

25 Q Okay. Can you describe for me what an

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1 employer self-funded health benefits plan is?

2 MS. MINICH: Objection.

3 THE WITNESS: So a fully funded plan is
4 when an employer contracts with a carrier such as
5 Harvard Pilgrim and they pay a monthly premium to
6 the carrier, the carrier manages and has the risk
7 in terms of the claims. The carrier pays the
8 claims, no matter what level.

9 When you're self-insured, the employer
10 then takes on that risk and reward, and uses a
11 third-party administrator such as HPI to process
12 claims. So the claims come, as an example, on a
13 weekly or monthly basis, Turbocam then pays HPI to
14 pay those -- and process those claims to the
15 providers.

16 So Turbocam is not cutting a check to
17 Catholic Memorial Hospital. It's sending funds to
18 HPI who then pays those claims.

19 HPI just processes, though. They don't
20 have the risk of, it's 300,000 or is it 1,500?
21 They're just processing.

22 Q So just so I understand, because trying
23 to -- I -- I don't have deep knowledge of
24 insurance. I have basic -- some basic knowledge.

25 Turbocam has a pool of money that it

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1 uses and that it provides to HPI to pay employee
2 -- employee health claims under the self-funded
3 plan that's Exhibit 3; is that correct?

4 MS. MINICH: Objection.

5 THE WITNESS: I believe -- this is
6 financial stuff. I believe there's an escrow type
7 account that's set up that Turbocam has to have
8 available to pay those, but --

9 MR. KLEIN: Okay.

10 THE WITNESS: -- in essence, yeah.
11 There's -- there's forecasts and money made
12 available.

13 Q Okay. But regardless of the mechanics
14 of different accounts and so forth, is it correct
15 that the money to pay the claims under the
16 high-deductible plan that's Exhibit 3 is a pool of
17 money provided by Turbocam?

18 MS. MINICH: Objection.

19 THE WITNESS: I don't -- I don't think
20 so. The reason for that is we get reports of
21 services done scrubbed of personal data. And then
22 those specific claims are paid and processed,
23 sometimes on a weekly basis, and then paid by HPI
24 on our behalf by using our dollars.

25 Q Okay. But the dollars paid originate

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1 with Turbocam?

2 A Oh, yes.

3 Q Okay. And the dollars that Turbocam
4 uses to provide to HPI to -- to pay employee
5 medical claims, where -- do those dollars include
6 employee contributions towards the health plan?

7 A I assume so.

8 Q Do employees contribute money towards
9 their health insurance?

10 A Yes.

11 Q Okay. And is it -- is it -- what --
12 what is that amount of money? How is that
13 calculated?

14 A It depends on the level of coverage.
15 By that I mean there's just a single employee, so
16 if someone is just insuring themselves. There's an
17 employee and spouse and/or children.

18 And then there's the full-blown family
19 plan. And the level of their contribution is
20 based on the level of coverage they select during
21 open enrollment.

22 Q Okay.

23 A Or initial eligibility enrollment.

24 Q And what is that contribution? What is
25 -- where -- what is that money used for when it's

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1 taken --

2 A It's --

3 Q -- it's taken out of an employee's
4 paycheck?

5 A Right. It is used to pay in part
6 claims.

7 Q Okay. So the pool of money that
8 Turbocam uses to pay claims via HPI consists of
9 money that employees contribute and money that
10 Turbocam contributes; is that accurate?

11 MS. MINICH: Objection.

12 THE WITNESS: To the best of my
13 knowledge, yes.

14 Q Okay. And employee contributions do
15 not make up the full amount of money that Turbocam
16 provides to HPI to pay claims; is that right?

17 A Not typically, no.

18 Q When you say not typically?

19 A Payroll -- benefit deductions are on a
20 biweekly or monthly basis based on whatever
21 payroll schedule the employee is on.

22 I could imagine there might be a pay
23 period where the claims that come in during that
24 week or period may be less -- may be covered
25 entirely by the employee contributions.

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1 an employee's contribution to the health plan
2 doesn't cover all of the cost of employee claims;
3 is that correct?

4 A I don't know that for sure. I don't --
5 I would assume it doesn't because we don't charge
6 our employees a lot --

7 Q Okay.

8 A -- for their benefits.

9 Q Now, you referenced that, in a
10 self-funded health plan such as Turbocam's
11 high-deductible plan, which is Exhibit 3, there's
12 a claims administrator?

13 A Yes.

14 Q Okay. And who has been the claims
15 administrator for Turbocam's High-Deductible
16 Health Plan since January of 2021?

17 A Health Plans, Inc.

18 Q Okay. And can you tell me with respect
19 to the administration of Turbocam's
20 high-deductible group medical plan, which is
21 Exhibit 3, what -- what is the role of the -- of
22 HPI, Health Plans, Inc., as claims administrator?

23 A Well, they -- they receive the claims
24 from the provider. They -- my understanding, they
25 subject those to the plan design to make sure

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1 BY MR. KLEIN:

2 Q Okay. And when you say, the provider
3 communicates with the insurance, that's Health
4 Plans, Inc.?

5 A Right.

6 Q Okay. So the provider or employee
7 submits a claim to Health Plans, Inc.; is that --
8 would that be your understanding of how the plan
9 works?

10 A Yeah. As the -- as the claim
11 processor, yes.

12 Q Okay. An -- an employee wouldn't
13 submit a claim to Turbocam, would they?

14 A No.

15 Q Okay. So the employees or -- or their
16 doctor submits the claim to Health Plans, Inc.,
17 and Health Plans, Inc., makes a determination of
18 whether the claim is payable under the plan; is
19 that correct?

20 A That's my understanding.

21 Q All right. And when the claim is
22 submitted, would it be the responsibility of
23 Health Plans, Inc. to determine whether the
24 diagnosis of aneurysm in this case was a correct
25 diagnosis?

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1 MS. MINICH: Objection.

2 THE WITNESS: Not that I'm aware of. I
3 don't --

4 MR. KLEIN: Well, what --

5 THE WITNESS: -- I don't believe that's
6 their role, no.

7 BY MR. KLEIN:

8 Q Okay. Is it anybody's role? Does --
9 does -- well, let me ask this, then. Does
10 Turbocam have any -- in -- in terms of the
11 implementation of the -- of the PPO plan, which is
12 Exhibit 3, okay, the high-deductible plan. Does
13 Turbocam ever review any claims for coverage
14 submitted by employees?

15 A Not -- not in the sense of is it
16 included or excluded on the plan. We rely on HPI
17 to make that determination --

18 Q Okay. So --

19 A -- based on the information they get
20 from the provider.

21 Q Okay. So based on the information --
22 so let me just clear, then. So Turbocam would not
23 -- would not undertake any assessment of the
24 validity of a claim made under the plan; is that
25 correct?

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1 A That's correct.

2 Q Okay. And so Turbocam wouldn't be
3 determining if the diagnosis of aneurysm was --
4 was a -- an appropriate medical diagnosis; is that
5 right?

6 A In that example, no. That would --
7 that's not our expertise.

8 Q Okay. And when you say it's not our
9 expertise, nobody at Turbocam has expertise in
10 assessing the validity of medical diagnoses; is
11 that correct?

12 A Anybody at -- I can't -- I can't answer
13 that, just because I don't know that.

14 Q Okay. Is there anybody in the -- what
15 is the name of the department that you oversee?

16 A Personnel Department --

17 Q All right.

18 A -- and Employee Growth and Development.

19 Q Since you've been employed at Turbocam
20 since 2012, are you aware of anybody in the
21 personnel department who's had expertise in
22 evaluating medical diagnoses?

23 A No.

24 Q Okay. And when the -- under the
25 example I'm giving you where the employee has an

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1 know what that refers -- what the term claim
2 administrator refers to?

3 A Yes. The claim administrator,
4 typically a third-party administrator such as
5 Health Plans, Inc. is the one that processes the
6 claims, verifies eligibility of the services like
7 we discussed earlier.

8 Q And there's a designation for
9 prescription benefit manager, Optum Rx. What --
10 what does that refer to?

11 A They are the third-party administrator
12 group that we work with to administrate our
13 prescriptions under the plan.

14 Q Okay. Are prescriptions under the plan
15 handled independently of HPI's involvement?

16 A That's my understanding, yes.

17 Q Okay. Prior to 2021, is it correct
18 that Turbo plan's health benefits were not a
19 self-funded employer health benefit plan?

20 MS. MINICH: Objection.

21 THE WITNESS: To my knowledge of from
22 when I worked there, prior to 2021, the plans were
23 fully insured.

24 Q And by fully insured, you mean?

25 A Meaning not self-insured.

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1 Q Okay. Why did Turbocam switch from a
2 fully-insured plan to a self-funded health benefit
3 plan?

4 A We had discussed it with CGI, our
5 broker, on an annual basis as a -- primarily a
6 financial mechanism that allowed you to have cost
7 savings -- potential cost savings due to self --
8 being self-insured, because you're taking on more
9 of the risk.

10 Secondly, it allows you more
11 flexibility in managing inclusions and
12 exclusions on the plan. For example, a little
13 more around setting copays, deductibles, those
14 types of plan design elements.

15 Q Is it your understanding that under
16 Turbo -- Turbocam self-funded health benefits plan
17 that Turbocam has the authority to exclude certain
18 services from the plan design?

19 A Yes.

20 Q Okay. And would -- is it also your
21 understanding then that Turbocam has the -- as --
22 as the employer of a -- an -- in a self-funded
23 health benefits plan, that Turbocam has the
24 authority to direct that certain health services
25 be included in its health benefits plan?

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1 A Yes.

2 Q You're aware that there's an -- there's
3 an exclusion in the plan for treatment of gender
4 dysphoria; is that correct?

5 A Yes.

6 Q Okay. Does Turbocam have the authority
7 to remove that exclusion?

8 A Yes.

9 Q And if Turbocam removed the exclusion,
10 and an employee with gender dysphoria needed, for
11 example, a surgical treatment, is it correct that
12 that employee would submit a claim to Health
13 Plans, Inc.?

14 MS. MINICH: Objection.

15 THE WITNESS: The -- the -- the
16 employee can always submit a claim. It's whether
17 it's approved or not.

18 Q Okay. But so --

19 A Yeah. They would be entitled to submit
20 the claim.

21 Q Okay. They wouldn't submit the claim
22 to Turbocam?

23 A No. They would submit it -- their --
24 their provider would actually submit it, right.
25 The provider's providing the services, they would

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1 and customization that Darika was responsible for.

2 Yeah, the -- the -- yeah.

3 Q Okay. Did Turbocam have any -- did --
4 in -- in terms of the implementation of the
5 self-funded health benefit plan leading up to
6 January 2021, did Turbocam have any input into the
7 actual scope of medical services that would be
8 covered?

9 A Yes. The -- the -- again, as I recall,
10 in the -- this may have been the -- an assumption
11 that the plan is -- is -- mimics the current plan.
12 Yeah.

13 Q When you say mimics the current plan,
14 are you saying that Turbocam had an assumption
15 that the self -- that the scope of coverage under
16 the self-funded health benefits plan mimicked the
17 scope of coverage under the prior fully-insured
18 plan?

19 A Yes.

20 Q Okay. And was that important to
21 Turbocam?

22 MS. MINICH: Objection.

23 THE WITNESS: In the general sense, yes.

24 Q Okay. And why was that?

25 A Because we would want to make sure that

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1 in -- in the -- in an ideal state, you'd want to
2 ensure that it has the -- the appropriate
3 inclusions and exclusions and -- and deductibles
4 and all those basics that go into the plan.

5 Q I guess my question is -- why was it
6 important to Turbocam --

7 A Oh.

8 Q -- as an employer, to make sure that
9 the exclusions and inclusions in the fully-insured
10 plan were mimicked in the self-funded plan?

11 MS. MINICH: Objection.

12 THE WITNESS: For Turbocam, it would be
13 to ensure that it was in alignment with our
14 mission and our -- the religious convictions
15 associated with it, beyond just making sure were
16 the deductibles correct, were the copays what we
17 would like, and all -- and all those other details.

18 Q Did the fully-insured plans that
19 Turbocam had in effect prior to 2021 align with
20 its mission?

21 A Prior to 2021?

22 Of what -- yeah. Of what we were aware
23 of. Yes.

24 Q It was -- so just to be clear. It was
25 important to Turbocam that its health benefits

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1 plan align with its mission; correct?

2 A Correct.

3 Q Okay. Prior to January, 2021, what
4 steps did Turbocam make to -- to ensure that its
5 health benefits plan aligned with its mission?

6 A In a general sense, it's the review of
7 the -- the plan document.

8 Q Okay. And when you say --

9 A In some --

10 Q I'm sorry, go ahead.

11 A In some instances, it -- it doesn't
12 come up until something comes up.

13 Q Did Turbocam take any steps to ensure
14 that it's fully-insured plans prior to 2021 or in
15 alignment with its mission?

16 A Yes. Specifically in regards to
17 voluntary abortion, voluntary termination of
18 pregnancy, you have -- you have less flexibility
19 under a fully-insured plan. So to some degree,
20 you -- you have to accept what the carrier
21 provides, so -- which is why you go self-insured.
22 So you know, that's the added flexibility you get.

23 Carriers aren't really into customizing
24 their -- their plans too much because it becomes
25 way too complicated for them to manage

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1 administratively.

2 Q Prior to January 2021, was Turbocam's
3 health benefits plan a fully-insured plan through
4 Harvard Pilgrim Healthcare?

5 A While I was employed by Turbocam, yes.
6 I can't speak to prior.

7 Q All right. So since 2012 -- between
8 2012 and 2000 -- and January 1, 2021, Turbocam's
9 health insurance coverage was through
10 fully-insured plans from Harvard Pilgrim
11 Healthcare; is that correct?

12 A Correct.

13 Q All right. And during -- from 2012 to
14 2021, what steps did Turbocam take to make sure
15 that those Harvard Pilgrim fully-insured plans --
16 that the coverage in those plans was aligned with
17 its mission?

18 MS. MINICH: Objection.

19 THE WITNESS: Review of the plan
20 document is the typical approach you take.

21 MR. KLEIN: Okay.

22 THE WITNESS: We -- go ahead. Sorry.

23 Q That's all right. Okay. Based on the
24 review of the plan documents, did Turbocam
25 identify any coverages in the Harvard Pilgrim

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1 make an exception or change the plan design with
2 respect to coverage of the -- of treatment for
3 gender dysphoria?

4 A Because it wouldn't be in alignment
5 with our mission.

6 Q And when you say, it wouldn't be in
7 alignment with our mission, can you tell me what
8 you mean by that?

9 A Well, the -- the mission states that
10 Turbocam exists as a business for the purpose of
11 honoring God, creating wealth for its employees,
12 and supporting Christian service to God and
13 people. It would be against our -- the religious
14 convictions of Turbocam to cover it.

15 Q How did you learn that?

16 A I learned that through my -- at that
17 time, nine -- nine years of -- or eight years of
18 working at Turbocam, understanding the mission,
19 seeing how decisions are made, knowing -- knowing
20 what the mission says and -- and also what it
21 means.

22 Q Okay. So when did you yourself come to
23 the understanding that coverage of gender
24 dysphoria would not be in alignment with
25 Turbocam's mission?

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1 A Correct.

2 Q Okay. And how did you know that
3 covering treatment of gender dysphoria would not
4 be in alignment with Turbocam's mission?

5 A As -- as I believe I stated earlier,
6 having worked there and also understanding how the
7 mission, I guess, functions practically, and my --
8 my background as a Christian influences that, and
9 like I said, that, you know, believing that --
10 that man is created in the image of God and men
11 and women -- men and women -- and any -- any
12 attempt to change would not be -- not be honoring
13 God.

14 Q Was it your decision as the director of
15 talent development not to change the plan design
16 to cover treatment of gender dysphoria?

17 A The -- the -- the plan had already
18 stated that it didn't cover it. So I guess I'm
19 confused by what you're asking.

20 Q Well, I'm talking about the e-mail that
21 is Exhibit 12.

22 A Yes.

23 Q Do you see that e-mail that you
24 received and wrote?

25 A Yes.

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1 Q All right. Has financial cost ever
2 been a reason that Turbocam objects to coverage of
3 gender dysphoria?

4 A Again, it's always a piece of any
5 exclusions. You -- you think about cost as part
6 of that whole equation, but it's --

7 Q I'm asking you --

8 A -- it's a minor --

9 Q Was cost --

10 A -- it's a minor piece.

11 Q -- a factor in the decision of Turbocam
12 not to cover treatment of gender dysphoria, yes or
13 no?

14 A No.

15 Q So it's correct then that the only
16 reason that Turbocam objects to providing coverage
17 for gender dysphoria in its health plan is because
18 of the mission and religious values of the
19 company; correct?

20 A Yes.

21 Q Did you ever actually make any
22 investigation of the cost of treatment of gender
23 dysphoria?

24 A No.

25 Q Okay. Did you ever ask anybody at

1 said on the topic. And I think my sense was at
2 the time that this could turn into something
3 bigger. So I want to make sure that there's
4 awareness of that.

5 Q What do you mean it could turn out to
6 something bigger?

7 A Bernier asked about it. It's on the
8 excluded list, had asked for an exception. I
9 denied that. And I guess my -- my experience
10 leads me to when someone starts asking in pointed
11 questions about, was this done intentionally,
12 alarms go off of my head that there might be some
13 sort of legal claim filed or something.

14 Q Did the meeting take place on April
15 13th, 2022 or thereabouts?

16 A I believe so.

17 Q Okay. What did you say at the meeting?

18 A I remember having the -- the wording --
19 there was questions about clarity. Marian had
20 asked about therapy related to -- he had a
21 question about if that -- for -- he asked if you
22 could carve that piece out and -- or is that
23 covered? Would that be covered under other parts
24 of the plan? I believe he used maybe the term
25 under, like, mental health or something like that.

1 And I believe -- yeah, I don't recall
2 if it was Darika or me said that it would likely
3 be covered under something else. And then I
4 remember Marian saying, no, let's leave it as is.

5 Q I'm sorry. So Darika indicated that
6 therapy for gender -- that counseling for gender
7 dysphoria would be covered under the plan?

8 A No.

9 Q Okay.

10 A She said it -- it may be covered under
11 general mental health counseling. She did not
12 that I recall say counseling for gender dysphoria
13 would be covered under another section
14 specifically. She didn't use the term, that I
15 recall.

16 Q So I'm going to have to back up because
17 I'm confused about the discussion of counseling or
18 therapy in this meeting, okay? So take me through
19 who raised the issue of therapy or counseling?

20 A Marian asked about that wording in the
21 exclusion that talks about therapy, and raised the
22 question of, can we carve that out? Is there a
23 way to do that? Would it make sense or would that
24 be covered somehow under another part of the plan
25 --

1 Q When you say --

2 A -- such as mental health.

3 Q When you say carve it out, do you mean
4 carve it out from the exclusion?

5 A Right. Like, remove that wording --

6 Q Okay.

7 A -- specifically.

8 Q Such that counseling for gender
9 dysphoria would be covered?

10 A I believe -- I -- yeah, I guess I can't
11 speak for what he meant by that.

12 Q Okay. In your understanding, was he
13 raising the question of whether the plan should be
14 modified to allow coverage for counseling for
15 gender dysphoria? Is that the question he was
16 raising?

17 MS. MINICH: Objection.

18 THE WITNESS: That's how I interpreted
19 it.

20 Q Was there a discussion at the meeting
21 about whether counseling for gender dysphoria
22 should be covered?

23 A I -- I don't recall if it was framed in
24 that way.

25 Q Well, how is it framed?

1 A It was -- it was framed in, if it's --
2 if it's not carved out, if we don't make an
3 exception, then is Bernier able to have some level
4 of mental health therapy?

5 And as I recall, that's when Darika
6 said she thought it would be, but didn't say this
7 gender dysphoria therapy would be covered under
8 this section. It was just it could be covered
9 under mental health.

10 Someone goes to a counselor and -- but
11 I don't know if that's true. This is all just
12 speculation. And I think and then Marian said,
13 you know, let's just leave it as is.

14 Q Leave what as is?

15 A The -- the current definition, the
16 current exclusion.

17 Q What else did you say at the meeting?

18 A I don't -- I don't recall. Other than
19 that, the discussion.

20 Q You don't recall anything at the
21 meeting other than a discussion of whether the
22 therapy should be covered?

23 A Not that I recall.

24 Q How long did the meeting last?

25 A I think it was -- it was half an hour,

1 probably, at most, it wasn't --

2 Q What did Marian Noronha say at this
3 meeting?

4 A As I said, he asked questions about the
5 wording, in particular the word -- the words
6 associated with therapy related to -- and asked if
7 there there, you know, could you carve that out or
8 would that be covered by another section, such as
9 mental health, like a very broad mental health
10 topic.

11 Q Did Marian say anything else at the
12 meeting about the exclusion?

13 A Not that I recall.

14 Q Did Marian at the exclusion -- I'm
15 sorry, at the meeting, express any view that
16 providing coverage for gender transition was not
17 in alignment with biblical teachings, or the
18 mission of the company?

19 A I don't recall that he did.

20 Q Okay. Have you ever, at any time
21 heard, Marian Noronha say that coverage for gender
22 dysphoria in Turbocam's health plan violates
23 biblical teachings, or the mission of the company.?

24 A It's -- talking about a 40-year period.
25 I recall just -- I'm trying to think, today's